

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>		10/28/95
O.I.P.E. CLASSIFIER			7/17/99
FORMALITY REVIEW	<i>Q</i>	7169E	11/12

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
3	✓
11	✓
29	✓
6	✓
16	✓
03	✓
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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41	✓
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43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here **ST AVAILABLE COPY**

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